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# Leading Causes of Death in Vietnam

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## Abstract

Vietnam is currently facing a public health crisis. Rates of chronic and preventable diseases are climbing, in addition to mortality rates from these diseases. If nothing is done to halt these rising rates, the health of the Vietnamese people will only continue to decline. Although there may be many factors contributing to these high death rates due to chronic diseases, risky health behaviors, such as smoking, and the state of the healthcare system can be considered two main contributors to the leading causes of death in Vietnam. The high smoking rates and high costs of healthcare are hindering the health of Vietnam, and may be related to the top causes of death, including stroke, ischemic heart disease, chronic obstructive pulmonary disease (COPD), and lower respiratory infections (World Health Organization and UN partners, 2015). Implementing government programs, including smoking cessation, smoking education, tobacco taxes, healthcare education, and continued work toward universal healthcare coverage, will hopefully help decrease the rising rates of chronic diseases and the high mortality rates they cause.

## Causes of Death

- Chronic diseases are by far the leading cause of mortality in the world (World Health Organization, 2014)
- In 2012, stroke killed 112.6 thousand people, 21.7% of all deaths in Vietnam (World Health Organization and UN partners, 2015)
- During 2012, ischemic heart disease contributed to 7% of deaths in Vietnam, equaling 36.5 thousand people died from ischemic heart disease (World Health Organization and UN partners, 2015)
- Chronic Pulmonary Obstructive Disorder, also known as COPD, was the third leading cause of death in Vietnam in 2012, accounting for 4.9% of deaths, which is equivalent to 25.5 thousand people (World Health Organization and UN partners, 2015).
- Lower respiratory infections in Vietnam killed 25 thousand people in 2012, making up 4.8% of all deaths (World Health Organization and UN partners, 2015). Lower respiratory infections usually refer to pneumonia, and are typically caused by bacteria, viruses, or fungi (Bhuyan et al., 2017).

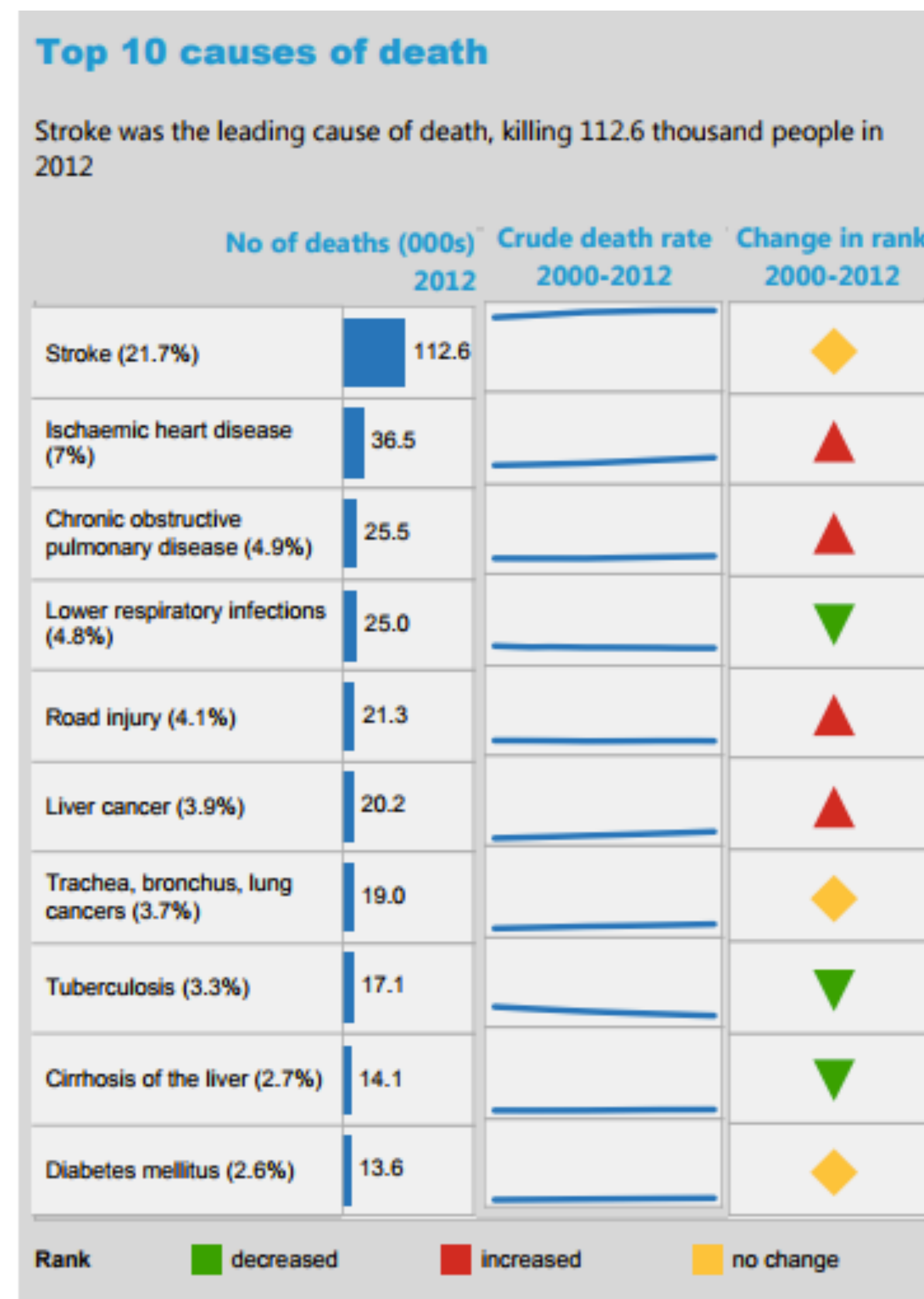


Chart source: Vietnam: WHO Statistical profile 2015

## Contributing Factors

### SMOKING

- In 2016, 22.5% of Vietnam's population smoked tobacco products, and 18.2% of the population smoked cigarettes (World Health Organization, 2017b).
- Vietnamese people are consistently exposed to secondhand smoke with 53.5% of non-smokers having exposure to tobacco smoke at home, and 36.8% of non-smokers having exposure to tobacco smoke at the workplace (World Health Organization, 2015).
- About 30% of fatal cardiovascular disease can be attributed to smoking (Martiniuk et al., 2006).
- 4-12% of hemorrhagic strokes and 11-27% of ischemic strokes can be attributed to smoking in males (Martiniuk et al., 2006).
- The largest risk factor for Vietnam's third leading cause of death, COPD, is smoking (Tan et al., 2003).
- Evidence shows that smoking cigarettes alters the respiratory tract's ability to defend itself from infection, making smokers more susceptible to lower respiratory tract infections, another one of Vietnam's leading causes of death (Marcy & Merrill, 1987).

### HEALTHCARE

- Vietnam's healthcare is in the process of transitioning to a universal healthcare system (Do, Oh, & Lee, 2014).
- The current Vietnamese healthcare system causes individuals to have high out-of-pocket payments, leading to care being allocated to those with the ability to pay instead of to those in need of care (Thanh, Tran, Wayne, Harstall, & Lindholm, 2014).
- 60% of poor households in rural Northern Vietnam were in debt, and a third of them cited payment for health care as the main reason for their debt (Whitehead, Dahlgren, & Evans, 2001).
- 31% of poor families choose to self-treat, instead of seeking medical care (Thuan et al., 2008).
- The high expenses of the current healthcare system in Vietnam lead to less people seeking medical care, enabling chronic diseases to potentially develop without proper management and treatment.



Photo source: <http://www.tradekey.com/product-free/Vietnamese-Cigarettes>



Photo source: <https://www.mapsofworld.com/vietnam>

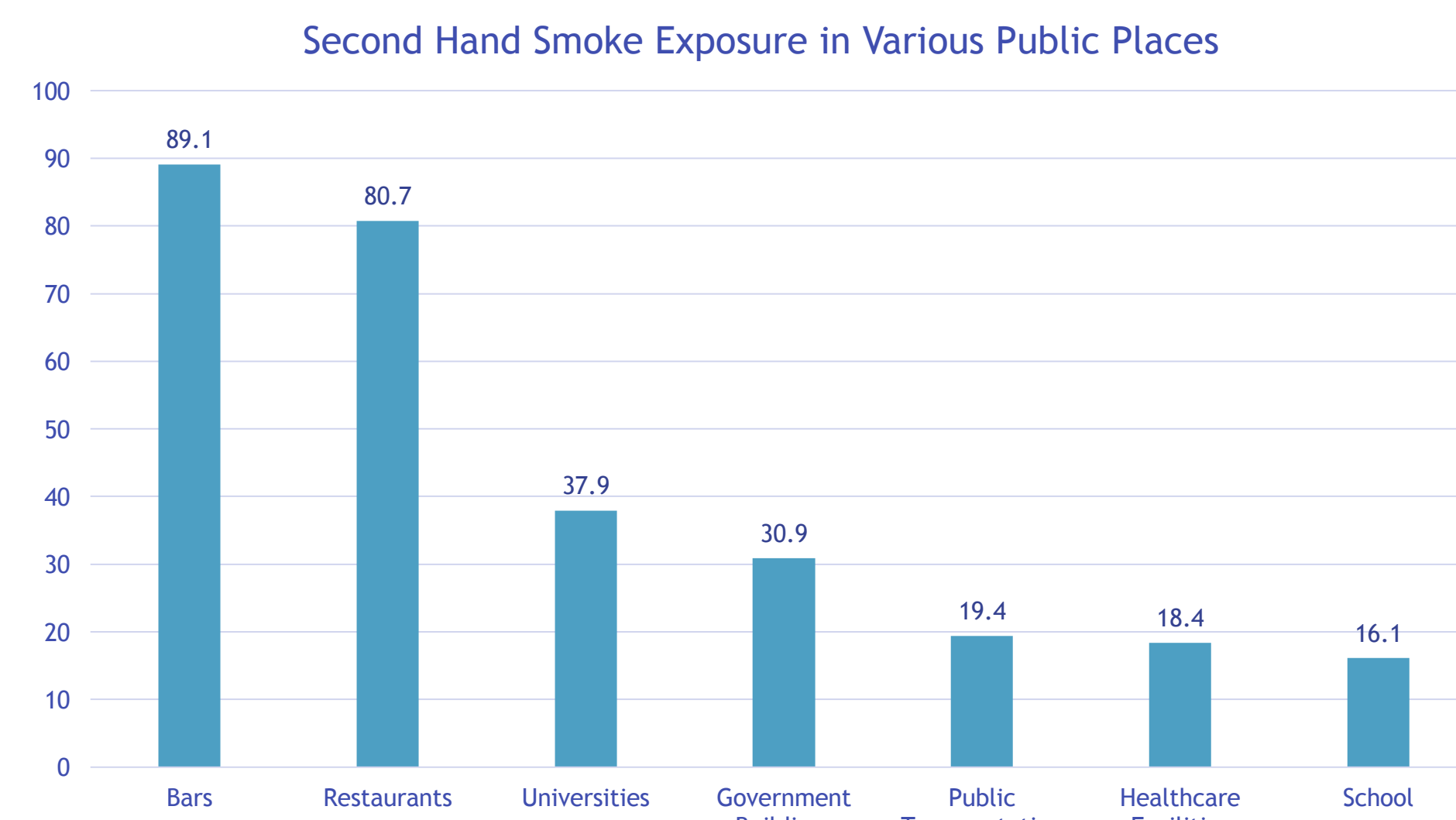


Chart source: Global Adult Tobacco Survey Vietnam Fact Sheet 2015

## Future Innervations

- Implementing a tobacco control policy, with higher tobacco taxes and a media campaign to publicize and enforce clean air laws, while also banning advertisements of tobacco products has potential to decrease smoking rates (Levy et al., 2006).
- Legalization of smoking cessation drugs, including replacement therapies, Bupropion, and Varenicline, could help smokers quit.
- Determining governmental healthcare coverage through an ability-to-pay mechanism, instead of minimum salary could allow more people to afford health insurance.
- For the wealthy, who perceive the enrollment contribution as too expensive, the government could enact an educational program to influence them to enroll.
- Similarly to Korea, the government needs to organize a plan for compulsory health insurance, starting with companies that employ more than 500 employees, and then extending to companies of 300, 100, and 16 employees over time (Do et al., 2014).
- In order to obtain universal coverage, Vietnam will need to reallocate resources to reduce the financial burden of subsidizing more than half of the population for health insurance by implementing policies such as raising taxes on tobacco and alcohol (Do et al., 2014).
- Decreased costs of healthcare, increased number of people insured, and a decrease in smoking prevalence will hopefully help to reduce the number of deaths due to chronic disease.



Photo source: <http://www.grandchallenges.ca/grantee-stars/>



Photo source: <http://vigorhealth.com.vn/>

## Conclusion

Overall, Vietnam faces a public health issue, with increasing death rates due to chronic diseases. These rising rates of disease and death may be preventable with alterations in healthcare and lifestyle. Currently, the largest obstacles in decreasing the prevalence of chronic diseases and deaths are the high costs of healthcare and the high rates of smoking. By implementing government programs, such as smoking cessation access, healthcare education, and more, Vietnam can work towards decreasing the prevalence of chronic diseases and improving the health and lifespan of the country's residents.

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